Attorney Docket Number UT10152003

PTO/SB101 (08-03)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)			John Sto				
		First Named Inventor John Stanier					
		COMPLETE IF KNOWN					
		olication Number					
Declaration Declaration	Fili	ng Date	10/29/2003				
Submitted OR Submitted at with Initial Filing (surch		Unit	3712				
Filing (37 CFR 1.16 (e)) required)		aminer Name	Bena Miller				
As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inventor of the sub	ject matter which is	s claimed and for whi	ich a patent is soug	ht on the invention entitled:			
Inflatable Humanoid Forms							
the specification of which	(Title of the Inventio	on)					
is attached hereto							
OR was filed on (MM/DD/YYYY)		as United States A	pplication Number	or PCT International			
Application Number and	was amended on (	(MM/DD/YYYY)		(if applicable).			
I hereby state that I have reviewed and understand the any amendment specifically referred to above.	e contents of the a	bove identified spec	ification, including t	he claims, as amended by			
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s) Coun		oreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
	d on a supplement		PTO/SR/029 attack				
Additional foreign application numbers are listed	a on a supplementa	ai priority data sneet	LIOIODINZE SIISCI	ieu nereio.			

[Page 1 of 2]
This collection of information is required by 35 USC. 115 and 37 CFR 1.63. The Information Is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## **DECLARATION** — Utility or Design Patent Application **Customer Number** OR Correspondence address below Direct all correspondence to: 31105 or Bar Code Label Name **Address** ZIP State City Fax Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Family Name Given Name or Surname Stanier (first and middle [if Any]) John David Stanley Inventor's Signature State California Country USA Citizenship USA Residence: City San Luis Obispo Mailing Address 2900 Prefumo Canyon Road ZIP 93405 Country USA State California City San Luis Obispo A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: **Family Name Given Name** (first and middle [if any]) or Surname Inventor's Signature Citizenship State Country Residence: City **Mailing Address** ZIP Country State City

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A or 02LR attached hereto.

Additional inventors are being named on the  $\underline{0}$ 

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## **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number		
Filing Date	10/29/2003	
First Named Inventor	John Stanier	
Title	Inflatable Humanoid Forms	
Group Art Unit	3712	
	Bena Miller	
Attorney Docket Number	UT10152003	

I hereby appoint:							
	Customer Number	31105					
OR Practitioner(s) na	med below:						
	Name Registration Number						
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all							
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I am the: Applicant/Invent	or.						
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Name John \$	tanier / /						
Signature /// Standard							
Date / 10/25/03							
NOTE: Signatures of all the nventors or assignees; of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
	rms are submitted.						

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